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Paul VI’s “Transmission of Human Life”
A Deeper Rereading

by

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On Thursday, July 25, 1968, Pope Paul VI instructed two of his advisors, Monsignor (later Cardinal) Colombo in Rome, and Père Gustave Martelet, S.J., in Paris, to release his last Encyclical, *Humanae Vitae Tradendae Munus* — The Gift of Transmitting Human Life — usually referred to as HV. Other close advisors included Doctor Charles Rendu and his wife Elisabeth Rendu, of Paris, Co-Chairs of CLER, the French center for the promotion of temperature-rhythm, and Krakow Archbishop Karol Wojtyla (Voy-tee-wah), later Cardinal Wojtyla and Pope John Paul II. Early in 1968, the Rendus published a book to vindicate, on the basis of limited data, the reliability and psychological satisfaction of temperature-rhythm as a method of family planning. Archbishop Wojtyla had gathered his own study commission in Krakow, half a dozen priests, two of them doctors, and forwarded their recommendations to the Pope.

Paul VI was endeavoring to reply to the many questions that had arisen in the minds of Catholic mothers and fathers ever since Pius XI’s *Casti Connubii* — Chaste Marriage — of Wednesday, December 31, 1930, a document which this writer read at age eleven, as printed *in extenso* in the *New York Times*. Here, Pius XI speaks of marriage as a holy estate, a divine institution founded by God, subject to divine law. His Encyclical discusses adultery, divorce, cohabitation, and civil marriage under the
revised Italian code, which granted civil status to Church weddings. The Encyclical also takes up the challenge offered by the Anglican Bishops’ Lambeth endorsement, on Friday, August 15, 1930, of responsible parenthood.

In *Casti Connubii*, Pius XI asserts that any syngamy (marital union) intentionally deprived of its inherent capacity to procreate new life, is an intrinsically disordered action and that those who engage in such are guilty of grave moral evil. Pius XI does allow that a non-contracepting spouse may render the marital debt without sin, also that marriage acts foreseen to be infertile for natural causes of time (e.g. menopause) or of certain defects (e.g. chronic childlessness) remain morally permissible, because there are in marriage secondary ends: mutual help, the expression of mutual love, the satisfaction of desire (*concupiscentiae sedatio*) which couples are allowed to seek. On this latter point, Pius XI is rebutting Church Fathers (cf. Augustine) who tended to view syngamy, even for procreation, as at least venially sinful.

**Birth Control as Sin Stressed in 1930s**

Prior to 1930, Catholic spouses had remained blissfully unaware of their Church’s condemnation of birth control, as noted by moral theologians John Ford, S.J. and Gerald Kelly, S.J. in their *Modern Moral Theology* (1960). The evil of birth control was preached relentlessly in Catholic pulpits all throughout the 1930s. Margaret Sanger, founder of Planned Parenthood, was denounced as the “scarlet woman” of the Apocalypse and murderess of the unconceived, a notion based on the erroneous biology of Aristotle, which places the totality of a new life in the male seed. Our Protestant brethren came to look upon their Catholic neighbors as highly immoral people who could murder, cheat, steal, lie or covet to their hearts’ content as long as they did not practice birth control — the “only” Catholic “sin” at this time!

In 1932, Chicago doctor Leo J. Latz published his “Rhythm of Fertility and Sterility in Women”, summarizing the work of two gynecologists: Dr. Kyusaku Ogino of Japan and Dr. Herman Knaus of Austria. Dr. Ogino, from direct examination of the ovaries of 83 patients at abdominal surgery, observed that ovulation occurs on premenstrual days (PMD) 16, 15, 14, 13 or 12, the PMD being reckoned by reverse count from the date of the subsequent mensis as PMD-1. Dr. Knaus, from close observation of his patients, selected PMD-15 as the likely date of ovulation and had considerable success in guiding women into the practice of periodic abstinence as a method of child spacing. Thus was born the “rhythm” method to which Paul VI refers approvingly (HV 11, 1966 Linacre Quarterly).
In 1973, this method was renamed “Natural Family Planning” or NFP, at a Washington Conference.

With the advent of rhythm-NFP, the question arose: is the deliberate use of rhythm-NFP to forestall or postpone a new pregnancy an intrinsically disordered action as envisioned by Pius XI? The debate raged all through the 1930s and 40s (cf. Catholic Digest questions/answers). Some priests hazarded the opinion that rhythm might become legitimate after four, six, or eight children! To many, the discussion was academic: rhythm was useful to a couple wishing to achieve a pregnancy but much too unreliable for the successful spacing of births, cycle after cycle after cycle after cycle after cycle, especially in a multipara whose cycles tend to become highly irregular.

Pius XII resolved the Catholic conundrum on rhythm-NFP. In three magisterial addresses: on Monday, October 29, 1951 to the Italian Union of Catholic Midwives, on Monday, November 26, 1951 to the Italian Family Front, on Friday, September 12, 1958 to the International Congress of Haematology, Pius XII introduces responsible parenthood into Roman Catholic moral theology. He affirms the moral legitimacy of a regulation of births for serious motives, based on economic, social, medical or eugenic indications, to be achieved by the observance of infertile times and the use of natural temporary sterility. He expresses the hope that medical science would give this method a secure foundation.

Pius XII repeats the Catholic Church’s rejection of direct abortion but give one caveat — not every surgical intervention to save the life of a pregnant woman need be branded direct abortion. From the moral principles of actions with a two-fold effect, Pius XII justifies, e.g., the excision of a cancerous pregnant uterus.

As for the Pill, its use as a direct contraceptive cannot be accepted, Pius XII states. However, when taken under doctor’s orders as a remedy for a malady or malfunction of the body or of the organism, its use can be justified under two-fold effect. A wife need not, under these conditions, refrain from syngamy with her husband, Pius XII asserts.

During the 1950s and 60s, numerous Catholic couples tried, with might and main, to make a go of rhythm-NFP as a method of child spacing. A small fraction were successful and expressed their satisfaction with the method. A vast majority were not — they found the method unreliable and emotionally taxing because of its inherent self-contradiction: trying not to make a baby while possibly making a baby at the same time. Only people who have experienced this contradiction can vouch for its destructive psychological impact. It’s like being compelled, under pain of mortal sin, to say that “black” is “white”! This writer personally knew families of 6, 7, 8, 10, and 12 children that were
destroyed — separation, mental illness, divorce — by the imposition of rhythm-NFP as the only permissible method of family planning.

**Backlash to Rhythm-NFP**

The complaints of many families, notably in Europe, came to the ears of leaders within the Catholic Church. Two Cardinals, Suenens of Brussels and Wojtyla of Krakow, wrote books. Suenens' *Amour et Maîtrise de Soi*, bearing the imprimatur of Pope John XXIII, states that the Church cannot impose a rule without doing its utmost to make observance of the rule possible in practice. Wojtyla's *Love and Responsibility* is a pean in praise of rhythm-NFP as viewed by an outsider, the author so describes himself in his preface.

In the interim, rhythm-NFP developed more reliable protocols: the *basal body temperature* (BBT) method, introduced during the 1950s; the self-observation of *vaginal mucus* (*Ovulation Method — PM*) pioneered in the 1960s by Drs. Evelyn and John Billings of the Queen Victoria and Saint Vincent's Hospitals in Melbourne, and promoted by Dr. Thomas W. Hilgers of the Paul VI Institute in Omaha (see p.76 *infra*); the gynecological procedure of *cervical palpation*, introduced in the 1970s as an NFP adjunct by Dr. Edward Keefe of Saint Vincent’s Hospital, New York, taught by him to his patients and to their husbands as well. These newer approaches have greatly improved the reliability of NFP and made it into an excellent program of *sound sex education*, not for Catholics only, but for everyone, women and men of all faiths or none.

But these newer protocols do not totally eliminate the inherent weaknesses of unassisted NFP. In its present form, unsupplemented NFP cannot resolve the conundrum of couples faced with irregular cycles, double thermal shifts, multiple fertile signs, delayed or paracyclic ovulations. Many couples found that NFP could not give more than 16 to 18 months between births, with the attendant distress of counting days and interpreting, day after day after day after day after day after day, temperature profiles that look like Wall Street charts!

In March 1963, Pope John XXIII created the Papal Commission for the Study of Population, Births and the Family, known popularly as the *Papal Birth Control Commission*. This commission was enlarged by Paul VI and came to include Cardinals, Archbishops, priests, theologians, doctors, professors, and five women experts, three of them with their husbands. All five women were past child-bearing age. Noteworthy were Patrick and Patricia Crowley of Chicago, parents — they have a nun daughter — co-presidents of the Christian Family Movement, a Jocist
organization they founded and for which they received the *Pro Ecclesia et Pontifice* medal from Pius XII. At its largest extent, the Commission had about seventy-five members. Cardinal Wojtyła, a member, did not attend, apparently blocked by the Communist authorities in Warsaw.

The Commission met several times in Rome between 1963 and 1966. To avoid conflict with the Second Vatican Council, Paul VI removed the subject from consideration by the Council, which devoted articles 47 through 52 of its Constitution *Gaudium et Spes* — Joy and Hope (1965) to marriage. The Council noted:

> The actions within marriage by which the couple are united are noble and worthy ones. (GS 49) ...Marriage and conjugal love are by their nature ordained toward begetting and educating of children ...Marriage is not instituted solely for procreation ...it maintains its value even when offspring are lacking.(GS 50) ...Modern conditions often keep couples in circumstances where the size of their families should not be increased. As a result, the faithful exercise of love and the full intimacy of their lives are hard to maintain.(GS 51)

On the question of means, the Council notes:

> When there is question of harmonizing conjugal love with the responsible transmission of human life, the moral aspect of any procedure does not depend solely on ...intentions or ...motives. It must be determined by objective standards. These based on the nature of the human person and of (human) acts preserve the full sense of mutual self-giving and human procreation in the context of true love. ...Children of the Church may not undertake methods of regulating procreation found blameworthy by the teaching authority of the Church in its unfolding of divine law.(GS 51)

At this stage, the Council defers to the Commission in a celebrated footnote 14.

The Commission's labors have never been released. Two documents purporting to be from the Commission, were leaked to the press. Since they have no official standing, we need not consider them further.

Paul VI, in his Encyclical, thanks the Commission for their labors (HV 5) but dismisses their work as irrelevant (HV 6) because the Commission failed to achieve unanimity and some members had toyed with solutions incompatible with received doctrine.
Paul VI’s rejection of the Commission’s work had one unfortunate effect on the lives of Catholic people. Hundreds of couples had submitted their personal testimonies about NFP via the Commission. These couples now felt that their “Father in the Faith” had abandoned them. They had no place to go. They had tried the method recommended by the Encyclical and this method had failed them repeatedly. They became Catholics-in-exile, Jesus’ lost sheep in the wilderness (Luke 15:4-6). Catholics-in-exile they remain, thirty-one years later, together with their children, and now their grandchildren.

It is always disastrous when a father refuses to listen to his own children. The father of the prodigal son listens to his child (Luke 15:12-32). On Friday, November 8, 1968, the Archbishops and Bishops of France, speaking from Our Lady’s Basilica in Lourdes, in response to Pope Paul VI’s express invitation to the World’s Episcopates (HV 30), noted:

Well known is the spiritual anguish of sincere couples when natural family planning fails to give a sufficiently secure foundation to the regulation of births. (Pastoral Letter from Lourdes)

The San Francisco psychiatrist, Dr. Thomas Harris, founder of transactional analysis, describes the characteristics of a transaction which severs connections between two parties. The Roman Magisterium’s answer in HV 6 fits Dr. Harris’ pattern to a T, as a transaction addressed to the many families who had sent their testimonies to the Papal Commission.

People who read HV in the summer of 1968 read it too hastily. Critics dissented from the Encyclical because it left so many Catholic couples in the lurch with nowhere to go. Supporters rallied to a document which upheld the received norms.

The bitter and unforgiving dissention resulting from this hasty reading sundered the Catholic people in two. This discussion is totally unnecessary. Need we remember that Pope Paul VI of Rome and Patriarch Athenagoras of Constantinople met in Jerusalem in 1964 in an effort to repair a breach dating back to 1054 — nine hundred and ten years of suspicion between sister Christian churches?

Paul VI Misunderstood

A deeper reading and understanding of Paul VI’s text shows that the Pope did not intend to leave these thousands of couples in the lurch. Speaking only a month later to the *IInd Latin American Episcopal*
Conference (CELAM-II) in Medellin, Colombia, on Saturday, August 24, 1968, Paul VI tells us,

*Humanae Vitae* does not call for a blind race to overpopulation. It does not diminish the responsibility nor the freedom of spouses, to whom it allows an honest and reasonable limitation of births. It impedes neither the use of legitimate therapies nor the progress of scientific research. — (Paul VI, Address to the 2nd Latin American Episcopal Conference (CELAM II)) (emphasis added)

Paul VI’s appeal for legitimate therapies needs to be taken seriously. Catholic ethicist Janet E. Smith of the University of Dallas, a Catholic institution located in Texas, tells us what a legitimate therapy is. She says that “drugs and devices are ‘natural’ (i.e., legitimate) when they work in accord with nature and restore something to its natural condition” (J.E. Smith, *Humanae Vitae — A Generation Later*, Catholic University Press, 1991).

The key to a legitimate therapy for a Catholic couple seeking to space the next birth is an understanding of the natural factors that render, by Divine design, a woman infertile during the major part of her ovarian cycle. Physiological research during the past century and a half has shown that the human female cervix functions as biological valve, passing through states of closure, opening and closure during the course of an ovarian cycle (W.T. Smith, London, as early as 1855; J.M. Sims, London; H. Stieve, Berlin; M.R. Cohen, I.F. Stein, and B.M. Kaye, New York; Erik Odeblad, Stockholm; Lyn Billings and John Billings, Melbourne; Carl G. Hartman, *Science and the Safe Period*, Williams and Wilkins, Baltimore, 1962; Thomas W. Hilgers, *Scientific Foundations of the Ovulation Method*, Paul VI Institute Press, Omaha, 1995)

The closure is assured by gestagenic G-mucus, a thick, viscous fluid, which acts as a natural barrier against penetration of bacteria and spermatozoa into the inner genital tract. The opening is provided by stretchy estrogenic E-mucus (so-called “egg white mucus” from its resemblance to egg white) that comes out of cervical crypts at the periovulatory time, and perforates the G-mucus. The slightly alkaline E-mucus collects, nurtures, protects, feeds, capacitates, energizes and transports sperm. By its stretchiness, E-mucus can bypass diaphragms or work its way through foams and jellies. It can also collect sperms deposited outside the genital tract. Without E-mucus, sperms perish in the vaginal acidity.

The natural factors resident in the physical biochemistry of the human female anatomy and physiology are manyfold: the thick cervical

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G-mucus which acts as a barrier against the penetration of cellular organisms into the inner genital tract; vaginal secretions spermicidal in nature; hormones which prevent further ovulations while favoring gestation. They act as *divine contraceptives* (Genesis 16:2; 1 Samuel 1:5) implanted into the body of a woman by the design of the Almighty, to relieve her from excessive pregnancies (HV 11). Other factors, active during the periovulatory time, open up the cervical biovalve, are favorable to pregnancy, notably the stretchy estrogenic e-mucus already mentioned.

One can well ask: how many times during the course of a marriage does a couple need to make a child, and how many times do they need to be, as Jesus Christ says, quoting Adam: *"Le Basar Ehhad — Into the Flesh One"* (Genesis 2:24; Matthew 19:5; Mark 10:8)? The Empress Maria Theresa of Austria gave birth to sixteen children — close to the maximum that one mother could give. Does this mean that she needs to restrict the number of times she and her husband have syngamy to sixteen?

Let us read the words of Paul VI's *Humanae Vitae Tradendae* anew, seeking to integrate these natural factors coming from the physical biochemistry of human reproduction into the Papal thought. Paul VI says:

*The gift of transmitting human life, for which married persons are the free and responsible collaborators of God the Creator, has always been a source of great joys to them, even if sometimes accompanied by difficulties and distress.* (HV 1)

...Working and housing conditions, as well as increased economic and educational demands, often make the task of raising a large number of children difficult today....Woman as a person and her place in human society are now seen in a new light, also the value of conjugal love and the significance of the marital union as an expression of that love. (HV 2)...

No person professing the Catholic faith will deny to the Magisterium of the Catholic Church the competence to interpret the natural moral law (HV 4) ...Problems regarding the birth rate must be seen...in the light of an integral vision of the human person and of the human vocation, not only a natural and earthly vocation, but also as a supernatural and eternal vocation. (HV 7) ...Conjugal love reveals its true nature and nobility when seen in its supreme origin: God, Who is Love. Marriage is the wise institution of the Creator to bring to humankind the Divine design of Love. By means of the mutual gift of their persons, spouses try to reach a communion of their beings, striving for mutual personal perfection, to work with God in begetting and educating new lives. (HV 8)
And thus spouses achieve that unity, described by our first father Adam in lapidary words: "Le Basar Ehhad — Into the Flesh One", repeated with approval by Jesus Christ. To continue our rereading of HV:

Conjugal love is fully human...total...faithful...exclusive until death...fruitful.(HV 9)...Conjugal love requires that the spouses be conscious of their mission of responsible parenthood. Responsible parenthood requires knowledge and respect for the way biological processes work. Human intelligence discovers, in the power of transmitting life, biological laws which are part of the human person. Responsible parenthood demands dominion over the passions...the generous decision to raise a large family...or the decision, made for grave motives and with due respect for the moral law, to avoid a new birth temporarily or indefinitely. Responsible parenthood demands a profound relationship to the objective moral order established by God.(HV 10).

In HV 10, the Holy Father stresses that responsible parenthood requires knowledge and respect for the way biological processes work and that human intelligence discovers in the power of transmitting life biological laws which are part of the human person. These biological laws, of God’s own design, are determinant for the morality of the acts of spouses in the way they use their bodies in marital syngamy.

In HV 10, the Holy father also describes two types of families that practice responsible parenthood: the planned large family and the planned small family. Unfortunately the Holy Father ignores the large family that just comes, in spite of NFP, and treats it as non-existent, or else as irresponsible, to the great psychological and spiritual damage of the parents and children involved. It is pretty frightening to have the Pope tell you that you don’t exist or else that the children the Almighty gave you, in spite of NFP, came because of your own irresponsibility! The damage that this section of HV 10 has wrought continues to persist after thirty-one years. But let’s proceed with our rereading of HV:

...Spouses must conform their activity to the creative intention of God, manifested in the nature of marriage and of its acts.(HV 10) Marriage acts foreseen to be infertile, from causes independent of the will of the spouses, remain lawful: they are ordained to express and strengthen their union. In fact, experience shows that not every marital syngamy begets a new life. God has wisely provided laws and rhythms of fertility which, of themselves, space births. But the Church...teaches that every marital syngamy must remain open to the transmission of life.(HV 11)
This last sentence was amended in the Latin text issued several months later to read: “Ecclesia ... id docet necessarium esse ut *quilibet matrimonii usus* ad vitam humanan procreandam per se destinatus permaneat.”

This teaching...is based on the indissoluble link willed by God, that man cannot breach on his own initiative, between two significations of the conjugal act: union and procreation. By its intimate structure, the conjugal act, while profoundly uniting the spouses, enables them to beget new lives, according to the laws inscribed in the very being of man and woman.(HV 12)

Again, Paul VI stresses here once more that “the laws inscribed in the very being of man and woman” are determinant for the morality of their actions. These laws need not exclude the legitimate therapies he called for in Medellin. To continue with HV:

One must recognize that a mutual act of love, deprived of its capacity to transmit life, according to the particular laws with which the Creator endowed it, is an attainder against the design of marriage and the will of the Author of Life... We are not the masters of the sources of human life but rather the ministers of the design given by the Creator.(HV 13)

Here again the Papal emphasis is on the designs and laws written into the very structure of man and woman by the Creator.

The Church does not consider illicit the use of therapeutic means necessary to care for diseases of the organism, even if these means prevent procreation, provided that this prevention is not, for whatever motive, directly willed.(HV 15)

HV 15 defines what Paul VI means by a legitimate therapy.

...The Church affirms that (responsible parenthood) must be achieved while respecting the order established by God... It is licit to keep track of the natural rhythms (of fertility and infertility) ...to make use of marriage only during the infertile periods...Here the spouses make legitimate use of a natural disposition...as a manifestation of mutual affection and a safeguard to their mutual fidelity.(HV 16)

...We must recognize the limits that govern man in the use of his body, limits to be determined from the respect which is owed to the integrity of the human organism and of its functions.(HV 17)
It is desirable, as already hoped for by Pius XII, that medical science provide a sufficiently secure basis for the regulation of births through the observation of natural rhythms. (HV 24)

Humans can find their true happiness...only in respect for the laws inscribed by God in human nature which they are called upon to observe with intelligence and with love. (HV 31)

The whole emphasis of Paul VI’s HV is essentially that “the laws inscribed in the very being of man and woman” are determinant for the morality of their actions.

The one central message that derives from this Papal teaching is that married couples should conduct their conjugal life, and in particular, their syngamies, fully in accord with the laws that the Almighty inscribed into the bodies of woman and man — these laws provide syngamies that lead to the conception of a new child, but they also provide, on a statistically more numerous basis, for syngamies in which conception is blocked by natural forces that are of God’s own design.

**Therapies Permitted**

The assistance of medicine to aid those forces that lead to conception has systematically been accepted by Roman Catholic moral theology, at least as long as the medical procedures do not violate human dignity (*Donum Vitae*, 1987).

For couples for whom NFP is erratic and statistically unreliable, the use of therapeutic means with the *direct intention* of stabilizing and regularizing the *God-given factors of infertility* can be justified under two-fold effect. Such a use of therapies is not an intrinsically disordered action, rather it becomes a virtuous action and morally as innocent as the wearing of spectacles to correct defective eyesight.

The use of a natural disposition is permitted by Paul VI (HV 16). The stabilization and regularization of this natural disposition is not an intrinsically disordered act, it is a virtuous act since it strengthens and stabilizes a God-given natural disposition. There is no direct intention to prevent procreation, rather there is a direct intention to stabilize and regularize a natural disposition given to us by the Almighty. There is no justification for the denigration of a medical procedure as intrinsically dishonest when its direct purpose is to regularize the laws that the Almighty has built into the bodies of woman and man. The requirement that “every syngamy remain open to the transmission of life” (HV 11)
must be read in the light of the parallel statement that “God has wisely provided laws and rhythms of fertility (and infertility) which ...space births” (HV 11).

Any therapy taken for the direct purpose of insuring the proper functioning of the cervical biovalve — both in its opening state and in its closure states — should satisfy the moral criteria spelled out by the Popes (A.J. deBethune, Cath Med Qua rt [Gt.Brit.] 30, 67 [1979]; Nat Cath Reg, Jan. 9, 1994). Catholic women and their spouses, who use therapeutic means to control an irregular fertility, should feel confident that their actions fall within Pius XII’s and Paul VI’s ethical guidelines. The French Jesuit Gustave Martelet, advisor to Paul VI on Humanae Vitae, makes the point:

The fundamental right to the normalization of an abnormal cycle is always to be recognized as moral. The connection between the expression of love and the possible gift of life is not absolute but cyclical. When the power of life follows an anarchical schedule, to restore the normal timetable of the cycle is not to be guilty of contraception. There is no (sin of) contraception in taking care of an abnormally functioning organism, even through means that might be contraceptive for another purpose. (G. Martelet, S.J., Existence Humaine et Amour, Desclée, Paris, 1969.)

During the past quarter century, Dr. Thomas W. Hilgers and his group, working at the Creighton University Medical School and the Paul VI Institute for the Study of Human reproduction in Omaha, have developed the Creighton Model FertilityCare™ System, a standardized modification of the Billings Ovulation Method as a more precise approach to the determination of the fertility/infertility status of the next twenty-four hours in the body of a woman. Out of this has come the art and science of NaProTech or NaProTechnology™ — Natural Procreative Technology — which helps identify those aspects of ovarian cycles that are either normal or not normal.

An example occurs in a woman who has a very short luteal (post-ovulatory) phase, the result of insufficient progesterone from the corpus luteum. Supplemental hormone medication during the luteal phase can enhance the production of both progesterone and estradiol so that the luteal phase can be extended to a more normal length. This improves the health of the woman and lengthens her time of natural infertility, thereby rendering the observance of infertile times and the use of natural temporary sterility (Pius XII) more reliable.
Another example involves a woman with long and irregular cycles who ovulates infrequently and has trouble conceiving a child. In her case, it has been noted that she has an increased risk of both breast cancer and endometrial cancer. Progesterone therapy can provide this woman with the hormone she needs to reduce the danger of cancer. It also helps her to regulate her cycles so as to improve the possibility of either achieving or avoiding pregnancy by natural methods.

NaProTechnology™ has the ability to help women who have recurrent ovarian cysts, uterine bleeding, premenstrual syndrome, infertility, miscarriage and other reproductive anomalies. "NaProTech" does not hesitate to use the most modern medical techniques to monitor natural factors of both infertility and fertility in the human female and to provide gentle medical cures to difficult problems of either achieving or postponing pregnancy, such as progestational deficiency with its foreshortened luteal phases in the ovarian cycle, and gross irregularity in cycle lengths.

The author is indebted to Dr. Hilgers for instructing him in the many possibilities of NaProTechnology™ as an example of a legitimate therapy, as advocated by Paul VI (HV 15; Address to the IIInd Latin American Episcopal Conference)

Pope John Paul II has addressed the problem in his Encyclical Evangelium Vitae — The Gospel of Life — as follows:

Governments and the various international agencies must above all strive to create economic, social, public health and cultural conditions which will enable married couples to make their choices about procreation in full freedom and with genuine responsibility.(EV 91)

The work of educating in the service of life involves the training of married couples in responsible procreation. In its true meaning, responsible procreation requires couples to be obedient to the Lord’s call and to act as faithful interpreters of His plan (emphasis supplied). This happens when the family is generously open to new lives and when couples maintain an attitude of openness and service to life even if, for serious reasons and in respect of the moral law, they choose to avoid a new birth for the time being or indefinitely. The moral law obliges them in every case to control the impulse of instinct and passion, and to respect the biological laws inscribed in their person. It is precisely this respect which makes legitimate, at the service of responsible procreation, the use of natural methods of regulating fertility.(EV 97)
One might add: “and the use of *legitimate therapies*.” Again the key point is obedience to the Divine plan and respect for the biological laws inscribed in the persons of wife and husband. These laws provide God-given factors of fertility and infertility both.

“Respect for the biological laws inscribed in our persons”, as stressed by Pope John Paul II, *demands the availability of legitimate therapies* to regularize anarchical fertility, for the same reason that people wear glasses to correct defective eyesight or use hearing aids to overcome auditory loss. Those of us who wear glasses or use hearing aids are also showing “respect for the biological laws inscribed” in our persons. And we do not incur mortal sin in doing so!

Pius XI’s *Casti Connubii* characterizes as intrinsically disordered any marital act intentionally deprived of its inherent capacity to procreate new life. We know now, as Père Gustave Martelet, S.J., points out, that this inherent capacity is not absolute but cyclical. When this inherent capacity is not present, or ought not to be present according to the best signs given by natural family planning, the therapeutic use of fertility controls does not deprive the marriage act of any proper capacity to generate new life because this capacity is not there, or ought not to be there according to the biological laws which are part of the human person (HV 12). And therefore such a therapeutic use escapes even from Pius XI’s condemnation of an intrinsically disordered act.

It is high time that Paul VI’s call at Medellin for *legitimate therapies* be accepted and acted upon in the light of our deeper knowledge of the Divine plan for the physiology of the human reproductive system.

In 1951 and 1958, Pope Pius XII hoped that medical science would give a secure foundation to *l’osservanza dei tempi infecondi* and *la mise-à-profit de la stérilité temporaire naturelle*. Paul VI repeated this hope in 1968 (HV 24). From our improved knowledge of the natural factors of fertility and infertility that are implanted in the human body by the Creator, it is clear that the realization of this hope will have to pass through the channel of *legitimate therapies*. 